

Collective Order

Treatment of Simple Cystitis

Clinical Situation:

- All people with a vagina, aged 14 or over, presenting with signs and symptoms of a simple cystitis, who are directed by a nurse at Head and Hands towards a community pharmacist.

Professionals and professional activities described in the collective order:

- The nurses at Head and Hands can perform the following professional acts
 - Evaluate the patient's physical and mental state
 - Initiate diagnostic and therapeutic measures as described in the collective order
 - Exercise clinical surveillance and adjust the therapeutic plan as needed
- Community pharmacists can perform the following professional acts
 - Initiate pharmacotherapy as described in the collective order
 - Exercise clinical surveillance of the pharmacotherapeutic plan

Intention(s) of the collective order:

- Rapidly treat a simple cystitis in order to prevent complications

Indication(s) for initiation:

- The collective order can be applied once a diagnosis of simple cystitis has been made. This requires all other possible diagnoses to be excluded, as described in the protocol

Contraindications:

- Toxic appearance
- Tachycardia (pulse>100)
- Hypotension (sBP <90)
- Fever (T>38 C orally)
- Suspicion of a pyelonephritis, based on the protocol
- Complicated cystitis
 - Symptoms present for more than 7 days
 - Person with a penis
 - Age below 14 or above 65
 - Anatomical urinary tract anomaly
 - Urological surgery including bottom surgery
 - Urinary tract infection in the three prior months
 - Indwelling catheter

- Pregnancy or breastfeeding
- Comorbidities (DM, renal insufficiency, immunosuppression, HIV, etc...)

Detailed Professional Acts of the Nurse:

- **Evaluate the physical and mental state of the patient**
 - Evaluate the physical and mental status of the patient with thorough history and physical examination, including the taking of appropriate vital signs
 - Perform a chemstrip urine test
 - Send urine culture and analysis
 - Perform a pregnancy test if appropriate
 - Using the protocol, determine the presence of a simple cystitis
 - Verify the presence of contraindications, and refer to a physician if necessary
 - Decide whether or not to apply the collective order
- **Initiate diagnostic and therapeutic measures as described in the collective order**
 - Determine the presence of allergies to medications, in particular to sulfonamides, quinolones and fosfomycin
 - Complete the linkage form (Appendices A, B, or C) and give this to the patient, or fax it to the pharmacist. Inform the patient that they may present to any community pharmacist in possession of the collective order
 - Educate the patient on the treatment of simple cystitis
 - Offer an STBBI screen if appropriate
 - Respect patient autonomy in decision-making
- **Exercise clinical surveillance and adjust the therapeutic plan if necessary**
 - Give appropriate advice including preventative measures and, if possible, pursue post-treatment follow-up
 - Advise the patient to re-contact a nurse at Head and Hands or to consult a physician if there is no improvement within 72 hours of taking antibiotics, or if symptoms worsen or new symptoms appear
 - If the chemstrip reveals hematuria, advise the patient to reconsult a health service or physician after symptoms resolve, in order to be certain that the hematuria has resolved
 - When needed, orient the patient towards medical services
 - Document information in the dossier

Detailed Professional Acts of the Pharmacist:

- **Initiate pharmacotherapy as described in the collective order**
 - Upon the receipt of the linkage form for the application of a collective order, confirm that it applies to the relevant collective order
 - Analyze the pharmacotherapy of the patient
 - Verify that there are no contraindications

- Individualize the collective order
- Prepare the medications and give these to the patient
- Give to the patient all necessary information relating to the medications which they have been given
- **Exercise clinical surveillance of the pharmacotherapeutic plan**
 - Remind the patient that they should return to the responding nurse if necessary. The nurse commits to have given to the patient all necessary information to return to here again or to seek another medical service
 - Perform appropriate interventions in the event that the person is taking other medications

Refer to a physician if:

- Any of the contraindications listed in the ‘Contraindications section’
- No response to antibiotics within 72 hours

Therapeutic Intention:

- The choice can be made based on patient and nurse preference, and based on the presence of allergies to one or more of the medications listed
 - Macrobid 100 mg PO BID x 5 days
 - Fosfomycin 3 mg PO single dose
 - Septra DS 1 co PO BID x 3 days

Identification of Supervising Physician(s):

- Dr. Baijayanta Mukhopadhyay
- Dr. Yolaine Yim
- Dr. Myrill Solaski

Identification of the Responding Physician:

- Dr. Baijayanta Mukhopadhyay
- Dr. Yolaine Yim
- Dr. Myrill Solaski

References:

- UptoDate (version 23.3) ; <http://www.uptodate.com>
- Conseil du médicament du Québec. *Infections urinaires chez l'adulte*, October 2009.

Writing of this Collective Order:

This collective order was adapted from another collective order in use at Médecins du Monde Canada. It was written by medical students and reviewed by the nurses and physicians at Head and Hands.